



GP 2899
ERW

PATENT APPLICATION

OUR DOCKET NO. 20000408.ORI

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re App : Ron A. Balczewski, et al : August 2, 2004
Serial No.: 09/703,746 : Group Art Unit 2899
Filed : November 1, 2000
Title : SECURITY SYSTEM FOR IMPLANTABLE
MEDICAL DEVICES

Examiner Thomas R. Peeso

AMENDMENT UNDER 37 CFR 1.111

Mail Stop NON-FEE AMENDMENT
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This paper is submitted in response to a Non-final Office
Action dated July 15, 2004, which carried a shortened-statutory
period for response of three months.

Applicants request that the following amendments be
entered:

09/24/2004 KWATSON 00000001 081265 09703746

01 FC:1202 198.00 DA

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

09703746

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	55	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	55 minus 20 =	15
INDEPENDENT CLAIMS	7 minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

2/04

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	46	35	11
Independent	7	7	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total			
Independent			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total			
Independent			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 - *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐ OR

RATE	FEE
BASIC FEE	355.00
X\$ 9=	
X40=	
+135=	
TOTAL	

OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	710.00
X\$18=	270
X80=	
+270=	
TOTAL	

SMALL ENTITY OR

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL	

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$18=	198
X80=	
+270=	
TOTAL	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL	